

**BEST AVAILABLE COPY**

CLAIMS ONLY						SERIAL NO.		FILING DATE				
						APPLICANT(S)						
CLAIMS						*		*				
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51					
2							52					
3							53					
4							54					
5							55					
6							56					
7							57	1				
8							58		1			
9							59					
10							60		1			
11							61					
12							62					
13							63					
14							64					
15							65					
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38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
TOTAL IND.							TOTAL IND.	2				
TOTAL DEP.							TOTAL DEP.	2				
TOTAL CLAIMS							TOTAL CLAIMS	14				

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS